

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Akira TSUKIHASHI

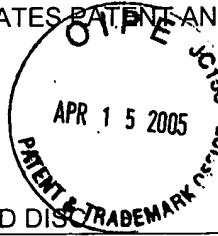
Serial No: 10/078,189

Filed: February 15, 2002

For: DISC RECORDING APPARATUS AND DISC

Art Unit: 2652

Examiner: Peter V. Agustin



I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
April 12, 2005

Date of Deposit

John P. Scherlach, Reg. No. 23,009

Name

Signature

04/12/05

Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of __ Patent Application No. __ filed __ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

the fee has been calculated as shown below.

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	22	-20	22 **	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	4	-3	4 ***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
TOTAL							\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$-0- to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$__ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

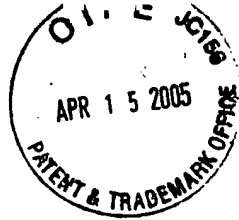
Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

John P. Scherlach
Registration No. 23,009
Attorney for Applicant(s)

Date: April 12, 2005

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Appl. No. 10/078,189
Amdt. Dated April 12, 2005
Reply to Office Action of February 8, 2005

Attorney Docket No. 81784.0249
Customer No.: 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Akira TSUKIHASHI
Serial No: 10/078,189
Confirmation No.: 5434
Filed: February 15, 2002
For: DISC RECORDING APPARATUS
AND DISC

Art Unit: 2652
Examiner: Peter V. Agustin

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John P. Scherlacher 04/12/05

Signature

Date

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of February 8, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.